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APPLICANTS

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** CONTINUING DATA *****

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** FOREIGN APPLICATIONS *****

JF

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 13	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>JF</i>	INITIALS <i>JF</i>		
Verified and Acknowledged				

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TITLE

METHODS AND DEVICES FOR COLLECTION OF SOFT TISSUE

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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☐ 1.18 Fees (Issue)

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